

# **INTERNATIONAL Student Application**

Please complete this form by typ I am applying to attend College of the Sequoias for the yea Spring (January through May) Deadline October 1	ır of: <u>2</u> 0	-	-		
Your Name: Last (Family)	First (G	iven)	Middle		
Preferred Name (optional):					
I am: Single Married Divorced/Separated	🗆 Male 🛛	Female Numb	per of Children		
Country of Birth	Country of Citize	nship			
Primary Language	Email				
My intended major (field of study) is:					
Home Country – Permanent Address (NO PO Boxes)	U. S. Current Ac	U. S. Current Address (If available) (NO PO Boxes)			
Number/Street/Apartment	Number/Street/A	Number/Street/Apartment			
City	City	State	Postal Code		
State/Province	Cell or Telephon	e Number			
Country Postal Code					
Are you currently in the United States?YesNo	b Have you applied	d for permanent reside	ence (green card)?YesNo		
If yes, what is your current status? (F-1, B-2, B-2, H-1, J-1 Transferring from another school: English is my country's primary/official language I have completed one of the following Language Proficience TOEFL I LELTS English is my country's primary/official language Statement of the following Language Proficience Statement of the following Language Proficience Statement of the following Language Statement of the following Statement of the following State	e submit a copy of yo No y Tests (must submit	ur current I-20, I-94, F	5		
Emergency Notification: Person to be notified in case of e   Relationship to me Home   E-mail Factor	mergency Phone	Cell	Phone		
E-mail Fa	3X	(Does this person	n speak EnglishYesNo)		
Release Authorization: The Right to Privacy Act in the Unacceptance status with anyone else but you. If you wish to					
Name of person(s) authorized to receive information: Telephone Number(s):					

**Medical Insurance** – All F-1/M-1 International Students are required to obtain a (TB Testing through the COS Health Center upon arrival on campus.

• Purchase international student health insurance with accident, hospitalization, repatriation and medical evacuation during the entire period of his/her enrollment with College of the Sequoias. You may choose from whom to purchase insurance as College of the Sequoias (COS) does NOT sell insurance nor recommend policies.

If you have any dependent family members who will accompany you in F-2 status, please list them below:							
	Dependent 1	Dependent 2	Dependent 3	Dependent 4			
Last Name							
First Name							
Middle Name							
Date of Birth							
Country of Birth							
City of Birth							
Country of Citizenship							
Country of Permanent							
Legal Residence							
Gender							
Relationship to You							

I certify the information that I have provided on this application is correct in all respects. I understand that false information may result in denial of admission or dismissal from College of the Sequoias (COS). All materials submitted by me for the purposes of admission become the property of College of the Sequoias. I agree to comply with the international Student Agreement and all COS, U.S. Department of Home Security (DHS) and F-1 Immigration Regulations while in attendance.

Print Your Name: \_\_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

#### MAILING I-20

Your I-20 can be mailed through the United States Post Office. If you desire to have it sent faster, please ask someone to pick it up from COS and send it to you through an express service.

Send I-20 to: Imv home co	untry or address in the Uni	ited States	up at COS, room 103	. Seguoia Building
				,

Address\_\_\_\_\_\_Address:

## \_\_\_\_\_

## **INTERNATIONAL STUDENT AGREEMENT**

### If I am admitted as a student at College of the Sequoias I agree to the following:

- I will enroll full-time by registering for at least 12 units of classes at College of the Sequoias each Fall and each Spring semester (Summer is optional).
- I understand that a maximum of 3 units for ONE distance education (Online) course per semester will count toward the 12 unit minimum that is required for full-time study. During your last semester, you may NOT take just an Online class but must take at least ONE in-person face-to-face class that meets at the College of the Sequoias.
- As needed, I will meet with a COS Counselor each Fall and each Spring semester to update my Student Educational Plan (SEP).
- If I wish to drop a class I will meet with the COS International Student Counselor.
- I will maintain a cumulative grade point average of 2.0 (C) or better to remain in good standing, and I am subject to academic dismissal if I remain on probation for two consecutive semesters.
- I understand if I owe any amount to COS my Fall classes will be dropped on June 30 and my Spring classes will be dropped 14 days after registering for classes.
- I will limit on-campus employment to no more than 19 hours per week while school is in session.
- I must attend College of the Sequoias for one year and obtain authorization from the U.S. Department of Homeland Security (DHS) before I may work off-campus.
- I understand that I must **notify the Office of International Students at COS of any changes** including, but not limited to, changing my phone number, email or address, transferring to another college/university, or returning to my home country.

- If I fail to comply with any of the College of the Sequoias Student Code of Conduct as stated in the College Catalog it may result in a hold placed on my student records or dismissal from the College.
- It is my responsibility to follow the SEVIS/DHS F-1 student regulations to maintain my F-1 student visa status.
- I must obtain **prior** authorization from the International Student Office for a Leave of Absence or to withdraw from school.
- I will complete my study objective shown on my International Student Application Form or be eligible to transfer to a university when I leave College of the Sequoias.
- I must pay all tuition and fees each semester according to College regulations. If I am not able to pay on time for any reason, I will immediately contact the COS Cashier's Office and COS International Students office to discuss options.

Failure to comply with this agreement will threaten my student status and could result in deportation from and future exclusion to the United States.

Signed:\_\_\_\_\_Date:\_\_\_\_\_Date:\_\_\_\_\_